

PTO/SB/01A (10-01)

Approved for use through 10/31/2002. OMB 0851-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN  
APPLICATION DATA SHEET (37 CFR 1.76)**

<b>Title of Invention</b>	<b>COPPER COMPLEXES AND THEIR USE AS WOOD PRESERVATIVES</b>
As the below named inventor(s), I/we declare that:	
This declaration is directed to:	
<input checked="checked" type="checkbox"/> The attached application, or <input type="checkbox"/> Application No. _____, filed on _____ <input type="checkbox"/> as amended on _____ (if applicable);	
I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought:	
I/ we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above:	
I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.	
All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.	

<b>FULL NAME OF INVENTOR(S)</b>	
Inventor one:	ALBERT GORDON ANDERSON
DATE:	October 31, 2003
Signature:	<i>Albert Gordon Anderson</i>
Citizen of:	US
Inventor two:	MARK A. SCIALDONE
DATE:	10/31/03
Signature:	<i>Mark A Scialdone</i>
Citizen of:	US
Inventor three:	
Signature:	
Citizen of:	
Inventor four:	
Signature:	
Citizen of:	

☐ Additional inventors are being named on \_\_\_\_\_ additional form(s) attached hereto.

**Burden Hour Statement:** This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.83. The information is used by the public to file (and the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 1 minute to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

FULL NAME OF INVENTOR(S)	
Inventor five	_____
Signature	_____ Citizen of: _____
Inventor six	_____
Signature	_____ Citizen of: _____
Inventor seven	_____
Signature	_____ Citizen of: _____
Inventor eight	_____
Signature	_____ Citizen of: _____
Inventor nine	_____
Signature	_____ Citizen of: _____
Inventor ten	_____
Signature	_____ Citizen of: _____
Inventor eleven	_____
Signature	_____ Citizen of: _____
Inventor twelve	_____
Signature	_____ Citizen of: _____
Inventor thirteen	_____
Signature	_____ Citizen of: _____
Inventor fourteen	_____
Signature	_____ Citizen of: _____
Inventor fifteen	_____
Signature	_____ Citizen of: _____

PTO/SB/81 (08-03)

Approved for use through 11/30/2005. OMB 0851-0035  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**POWER OF ATTORNEY  
and  
CORRESPONDENCE ADDRESS  
INDICATION FORM**

Application Number	UNKNOWN		
Filing Date	CONCURRENTLY HEREWITH		
First Named Inventor	Albert Gordon Anderson Et. Al.		
Title	COPPER COMPLEXES AND THEIR USE AS WOOD PRESERVATIVES		
Art Unit	UNKNOWN	Examiner Name	UNKNOWN
Attorney Docket Number	CL1960USNA		

I hereby appoint:



Practitioners at Customer Number:

23906

OR



Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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The address associated with Customer Number:

OR

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Address			
Address			
City	State	Zip	
Country			
Telephone	Fax		

I am the:



Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name	Albert Gordon Anderson		
Signature	<i>Albert Gordon Anderson</i>		
Date	October 31, 2003	Telephone	302-695-4413

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

\*Total of 2 forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**POWER OF ATTORNEY  
and  
CORRESPONDENCE ADDRESS  
INDICATION FORM**

Application Number	UNKNOWN		
Filing Date	CONCURRENTLY HEREWITH		
First Named Inventor	Albert Gordon Anderson Et. Al.		
Title	COPPER COMPLEXES AND THEIR USE AS WOOD PRESERVATIVES		
Art Unit	UNKNOWN	Examiner Name	UNKNOWN
Attorney Docket Number	CL1960USNA		

I hereby appoint:

☒ Practitioners at Customer Number:

23906

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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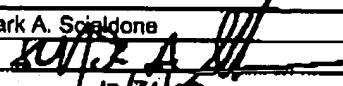
☐ The address associated with Customer Number:

OR

<input type="checkbox"/> Firm or Individual Name					
Address					
Address					
City		State		Zip	
Country					
Telephone		Fax			

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name	Mark A. Scialdone		
Signature			
Date	10/31/03	Telephone	302-695-3843

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 2 forms are submitted.

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